ID NO.

DATE

POSITION

FEE DETERMINATION

O.I.P.E. CLASSIFIER FORMALITY REVIEW

## RESPONSE FORMALITY REVIEW INDEX OF CLAIMS ..... Rejected N ...... Non-elected ..... Allowed (Through numeral)... Canceled Interference ..... Restricted

INITIALS

	Restricted	0	Appeal
Claim Date		0	Objected
Final Original	Claim	Date	
Final Final Conginal Conginal Congression Conginal Congression Con	Final	Cla	Vale
7 3 0 3 3	Final		Original
	51	Final	
	52		01 + + + + + + + + + + + + + + + + + + +
· [ ] 4 \	53	+++++++++++++++++++++++++++++++++++++++	
	54	10	
	55	10	
·	56	10	
. 9	57	100	
	59	107	
	60	108	
	61	110	
136/1	62		
	. 63	112	
2 15 1 1 1	64	113	<del></del>
3 16 4 17	65	114	<del></del>
5 18	66	115	
619	. 68	116	
7/20	69	117	+ + + + + + + + + + + + + + + + + + + +
821	70	119	+++++
922	771	120	<del>                                     </del>
16 163	72	121	<del></del>
1724	73	122	
18 25	74	123	
1 <u>9</u> 26	75 76	124	
21 28	77	125	
2229	78	126	
22 29 23 30	79	128	+++
[1031]	80	129	
24/32	81	130	+++++
[/] 33	82	131	+++++
1234	83	132	<del>                                     </del>
2535 7336	84	133	
	86	134	
19 38	87	136	
2739	88	137	
15 40	89	138	
2841	90	139	
2942	91	140	<del></del>
	92	141	<del> </del>
44 45	93	142	<del></del>
45	94	143	<del></del>
47	96	144	<del>                                     </del>
48	97	146	+-+-
49	98	147	<del>                                     </del>
50	99	148	<del></del>
	100	149	<del></del>
		150	
If m	Ore than 150 ole:		

If more than 150 claims or 10 actions staple additional sheet here